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**\*\* CONTINUING DATA \*\*\*\*\***  
 This application is a 371 of PCT/IB03/05408 11/20/2003 ☒ Yes, KMF

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*** ☒ PCT, KMF

**\*\* IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\***

Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		NETHERLANDS	3	9	4 <input checked="" type="checkbox"/> 3
Verified and /KRISTA M FLANAGAN/ Examiner's Signature	Initials				

**ADDRESS**  
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 UNITED STATES

**TITLE**  
 Power Amplifier with Bias Control

<b>FILING FEE RECEIVED</b> 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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